

Appendix 12 (as supplied by the authors)
Results for studies investigating evaluation of care outcomes (n = 4)

Study (design)	Disease cluster	Type of intervention	Intervention component combination	Specific outcome	Description of results
Perceptions and ratings of care or interventions (n = 3)					
Becker A 2011 <i>Mixed-methods</i>	DM + CVD	<u>Information and health technology:</u> <i>Computer-based Counseling system (CBCS)</i>	ED + SM	• User acceptance	<ul style="list-style-type: none"> • The user acceptance was good although patients claimed they would prefer more time and privacy to use the system and most patients wished information on different topics • None of the patients described difficulties in using the system • Personal relevance and the circumstances of use was identified as potential predictors of computer acceptability
Doyle 2017 <i>RCT; 8-week FU</i>	COPD + depression or anxiety	<u>Cognitive-behavioural:</u> Telephone-based CBT vs. telephone-based befriending	DM + ED + TM	Working Alliance Inventory (WAI-S) to measure strength of the therapeutic alliance	<ul style="list-style-type: none"> • Participants in the CBT group reported a stronger working alliance with their telephone support person (M = 67.5, SD = 8.9) compared to those in the befriending group (M = 49.4, SD = 18.6, p < .001). • There was a large effect reported between the two groups in the three subscales in the WAI-S with a significant difference in the therapeutic bond (Cohen's d = 0.7) and agreement on the tasks of therapy (Cohen's d = 0.7) and a very large difference on the goals of therapy (Cohen's d = 1.4), with participants in the CBT group rating the therapeutic bond, and agreement on tasks and goals of therapy with the therapist much higher than those in the befriending group.
Whitten P, 2007 <i>Mixed methods</i>	COPD + CHF	<u>Information and health technology</u> (Telemedicine): Home telehealth	DM + TM	Patient perceptions of the intervention	<ul style="list-style-type: none"> • Patients believed that telehealth was a good way to receive care and felt comfortable with the equipment they were using • Telehealth services were perceived as relatively neutral in the trade-off between receiving care in person and receiving care at a distance • Advantages of receiving home telehealth services were: increased contact with providers, the system's overall performance, improved efficiency for the nurses involved in providing the services, and improved feeling of security from having the system available. • Disadvantage of telehealth services: loss of personal contact with their nurses, hesitancy about using the technology or finding an appropriate place for the equipment in their home • Services which might best be delivered in person: receiving help with medication and variety of services (i.e. bathing, dressing, sampling blood, physical therapy and giving injections)
Satisfaction (n =2)					
Doyle 2017 <i>RCT; 8-week FU</i>	COPD + depression or anxiety	<u>Cognitive-behavioural:</u> Telephone-based CBT vs. telephone-based befriending	DM + ED + TM	Client Satisfaction Questionnaire (CSQ-8)	<ul style="list-style-type: none"> • On the study's satisfaction measures, both groups were mostly satisfied with the treatment received (CSQ-8), but participants in the CBT group were significantly more satisfied (M = 27.2, SD = 5.5) than those in the befriending group (M = 24.4, SD = 5.8), (p=0.020).

<p>Williams A 2012a <i>RCT; 10-month follow-up</i></p>	<p>DM + CKD</p>	<p><u>Self-management:</u> <i>Medication Self-Management Intervention vs. Usual care</i></p>	<p>DM + ED + SM</p>	<p>Satisfaction</p>	<ul style="list-style-type: none"> • All participants reported satisfaction with the intervention. Participants enjoyed being more actively engaged in their self-management, in particular, learning about the interrelationship of blood pressure, diabetes and kidney disease in a home visit with minimal inconvenience or cost to their usual routine in an environment where they could ask questions openly. The majority of participants enjoyed the ongoing supportive nature of the follow-up telephone calls. Seven participants said the information delivered in the intervention reinforced what they already knew.
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